OFFICIAL FILE ILLINOIS COMMERCE COMMISSION

ORIGINAL

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	nis application via e-docket, or if un ne Chief Clerk.)	able to do so, fi	le one original verified a	pplication	
WIGH GI	ie Offici Ofera.)		Docket No.	Office Use	Only
			# SM SM		AMM.
Please	provide the appropriate informatio	n in the () ar	eas in the heading below.		
Snappy	y Phone of Texas, Inc.				
local ex	ation for a certificate of schange authority to operate as a r of telecommunications	: : :	01-057	4	
service	es in the State of Illinois.	:		OHIEF CLERK'S	COMPERCE Nuc 22
	TELECOM	=	CATE TO BECOME A NS CARRIER s necessary.)	ERKIS OFFI	No. 11 C O 32 WIN
GENE	IKALU SAMANINA SAMAN			4	
1.	Applicant's Name(including d/b/a, Snappy Phone of Texas, Inc. de		FEIN# <u>hone</u>	62-1770	<u>765</u>
2.	Address: Street 6901 W. 70th St. City Shreveport		ss: P.O. Box 29620, Shreve tate/Zip <u>LA 71129</u>	port, <u>LA 71</u>	<u>149)</u>
	a. Authority Requested: (Mark a	ll that apply) _	13-403 Facilities Bas	sed Interex	change
		X	3-404 Resale of Local an	d/or Intere	xchange
			13-405 Facilities Based L	ocal	
3.	Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant is requesting each waiver/variance.				
	X Part 710 Uniform Sy	stem of Accour	nts for Telecommunication	ns Carriers	3
	Termination	of Service and	e Establishment of Credit I Issuance of Telephone I tions Carriers in the Stat	Directories	for Local
	_X_Section 735.180 Dir	ectories			
	X Other See Attac	hment A for	waivers requested.		

4.	For all applicants requesting local exchange authority under Section 13-404 or Section 13-405 blease complete the following: See Attachment B.			
	 (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document; (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document. 			
5.	In what area of the state does the Applicant propose to provide service?			
Sta	<u>atewide</u>			
6.	Please attach a sheet designating contact persons to work with Staff on the following:			
	a. issues related to processing this application b. consumer issues c. customer complaint resolution d. technical and service quality issues e. "tariff" and pricing issues f. 9-1-1 issues g. security/law enforcement Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address. See Attachment C			
7.	Please check type of organization?IndividualCorporationPartnership Date corporation was formed November 24, 1998Other (Specify)			
8.	Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois. See Attachment D.			
9.	List jurisdictions in which Applicant is offering service(s).			
	Arkansas, Kansas, Missouri, Oklahoma, and Texas			
10.	Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?			
	YES (Please provide details)X NO			
11.	Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?			
	YESX_NO			

	If YES, describe fully.
12.	Has Applicant provided service under any other name? YESXNO
	If YES, please list
13.	Will the Applicant keep its books and records in Illinois? YES _X_ NO If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested. See Attachment A.
MI A	NAGERIAL
14.	Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms. See Attachment E.
15.	List officers of Applicant.
	Jerry W. Black, President Arthur L. Magee, Secretary
16.	Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? YESX NO
	If YES, list entity.
17.	How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.) Applicant will bill customers monthly. Each bill will contain all of the information and notices required by 83 Ill. Adm. Code g 235.70 and all other information required by Part 235.
18.	How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?) Customers may call customer service toll-free at 1-888-913-9565 to submit complaints, or they may do so in writing and mail to Snappy Phone of Texas, Inc., at P.O. Box
	29620, Shreveport, LA 71149. Complaint resolution is handled by customer service personnel. Any written complaints received at the office are maintained at the home
	office by management. Snappy Phone of Texas, Inc. contracts with the incumbent carriers for service and repairs. Repair complaints will be reported immediately to the
	incumbent carrier through the service problem reporting interface. Service for
	Snappy Phone of Texas, Inc. customers will be provided by incumbent carrier personnel and our customers will receive service at least equal to that of incumbent
	carrier customers. Most customer inquiries or complaints are resolved during the
	customer's initial phone call. Issues that are not resolved are referred to a customer service manager. The manager then reviews the complaint and conducts further
	investigation if needed. The manager responds to the customer by phone within a

	week. If the resolution is negative to the customer, the customer may escalate the issue to Applicant's overall Customer Service Manager and an answer is provided to the customer by the next day. If the resolution is negative to the customer, the customer is informed of the address and phone number of the Commission's Consumer Affairs Division.
19.	Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? YES NO
20.	What telephone number(s) would a customer use to contact your company?
	<u>888-913-9565</u>
21.	Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act? X YESNO
22.	Please describe applicant's procedures to prevent slamming and cramming of customers? Customers subscribe to the company's services with a written letter of agency and service agreement. Since the company offers only prepaid local exchange services, the customer must affirmatively select their services and pay for those services prior to the commencement of service. Therefore, the possibility of slamming or cramming is minimal. The company requires all of its sales representatives and distributors to comply with all federal and state regulations regarding slamming and cramming. Any instances of non-compliance are thoroughly investigated and appropriate action taken. The company has never had any complaints regarding slamming or cramming.
23.	If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 735, 755, 756, 757, 770, and 772?
	X* YES NO (If no, please provide an explanation.) *except for the waivers requested
24.	Is Applicant aware that it must file tariffs prior to providing service in Illinois? X YES NO
ΕΠ	vancial e e e e e e e e e e e e e e e e e e e
25	. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service. See Attachment F.
TE	CHNICAL
26.	Does Applicant utilize its own equipment and/or facilities? YES _X NO
	If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

	If NO, which facility provider(s)'s services does the Applicant intend to use?
	Ameritech & Verizon
27.	Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).
	Prepaid local exchange service
28.	Will technical personnel be available at all times to assist customers with service problems?
	X YESNO
29.	If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? NO Not Applicable
	Gignature of Applicant)

VERIFICATION

This application shall be verified under oath.

OATH

State of Louisiana)
Parrish of <u>Caddo</u>)
Jerry W. Black makes oath and says that he is President
(Insert here the name of affiant) (Insert the official title of the affiant)
of Snappy Phone of Texas, Inc. (Insert here the exact legal title or name of the Applicant)
(Insert here the exact legal title or name of the Applicant)
that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.
(Signature of affiant)
MARGARET J. BLACK, Notary Public Caddo Parish, Louisiana Subscribed and sworn to before me, a Notary Public/ My Commission is for Life (Title of person authorized to administer oaths)
in the State and County above named, this He day of <u>August</u> , 2001.
(Signature of person authorized to administer oath)

EXHIBITS

	EXHIBIT
Waiver Requests	A
Appendices A, B, C, and D	В
Staff Contacts	C
Corporate Documents	D
Key Management Personnel	E
Financial Information	F
Chart of Accounts	G
ITAC and UTAC Membership Application And Agreement	H